

Central Park Picnic Use Application/Permit

OFFICE USE ONLY

Received by _____

Date: _____

Time: _____

Permit #: _____

Central Park Large Group Sites:

A ☐ B ☐ C ☐ D ☐

Central Park Medium Group Sites:

Lions 1 ☐ 2 ☐ Redwood 2 ☐ Brook 1 ☐ Kennedy ☐

Central Park Small Group Sites:

Redwood 1 ☐ Brook 2 ☐ Dock ☐ Playground ☐

Other Services/Sites:

Sports Bag ☐

Central Park Open Space ☐

(Reserved picnic sites require 1 person on site no later than 10:00 am)

Type of event: _____

Use: Day and Date _____ Number of People: _____

Start time: _____ AM ☐ PM ☐ End time: _____ AM ☐ PM ☐

Will there be amplified music? Yes ☐ No ☐

Will money exchange hands at event (donation, solicitation, collection, etc.)? Yes ☐ No ☐

If yes, explain: _____

Will signs or decorations be placed on City property for your event? Yes ☐ No ☐

If yes, explain: _____

Will other services be provided (caterer, performer, jump house, etc.)? Yes ☐ No ☐

If yes, list company/contractor names: _____

Will the public be invited to your event? Yes ☐ No ☐

Will this event be advertised? Web Site ☐ Radio ☐ Flyers ☐ Other ☐ _____

Will alcohol be served? Yes ☐ No ☐

I am requesting to serve alcohol from _____ am/pm to _____ am/pm.

I understand that I must provide adult supervision to prevent consumption of alcohol by minors.

I intend to serve: Beer ☐ Wine ☐ Champagne ☐

Describe serving method (cans, bottles, etc.) _____

I will not charge or solicit donations for admission to the event, including the provision of alcohol.

I and/or my organization expressly certify that I and/or my organization will be responsible for any damage or loss sustained to the grounds, building, furnishings or equipment; or unusual clean-up required, as a result of my and/or my organization's occupancy of the facility.

Name: _____ Organization: _____

Address/City/State/Zip: _____

Home/Work Phone #: _____ Cell Phone #: _____

E-mail address: _____ Fax #: _____

Signature: _____ Today's date: _____

Client class: I II III IV V VI Approved ☐ Disapproved ☐

Amount(s) paid: Fee(s) _____ Deposit(s) _____ Total _____

Charge ☐ Check ☐ # _____ Cash ☐

Remarks _____

Permit processed by: _____ Date processed: _____ Permit #: _____